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Sachiko Y. Snedden

(Depositor's name)

(Signature)

December 14, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/142,557	09/11/1998	LINDA MAY PILARSKI	P-1459(O)	2357

TITLE OF INVENTION: METHODS FOR CELL MOBILIZATION USING IN VIVO TREATMENT WITH HYALURONAN (HA)

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO YES	\$1370 \$700	\$0 \$300	\$1370 \$1000	02/16/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS	12/20/2004 BABRAHA2 00000077 502212 09142557		
MAIER, LEIGH C	1623	514-054000	01 FC:2501 02 FC:1504 03 FC:8001	700.00 DA 300.00 DA 15.00 DA	Pillsbury Winthrop LLP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

GOVERNORS OF THE UNIVERSITY
OF ALBERTA, THE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

EDMONTON, ALBERTA, CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 5

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2212 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above).

☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Donna O. Perdue

Date

December 14, 2004

Typed or printed name

Registration No.

51,166

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT APPLICATION OF

Pilarski

Confirmation No.: 2357

Serial No.: 09/142,557

Group Art Unit: 1623

Filed: September 11, 1998

Examiner: Maier, Leigh C.

Title: METHODS FOR CELL MOBILIZATION USING IN VIVO TREATMENT WITH
HYALURONAN (HA)

TRANSMITTAL LETTER

Mail Stop Issue Fee
Commissioner for Patents
PO Box 1450
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I hereby certify that, on the date shown below, this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: December 14, 2004

By: 

Sachiko Y. Snedden

Sir:

Transmitted herewith for filing are the following:

1. Part B – Issue Fee Transmittal (duplicate);
2. Duplicate copy of this transmittal for Deposit Account accounting purposes;
3. Return Postcard.

Fees in the total amount of \$1,015.00 for issue fee (\$700, small entity), publication fee (\$300) and advance order fee (5 copies of patent, \$15.00) are incurred for the above-identified application. The Commissioner is hereby authorized to charge any fee, that may be due in connection with this and the attached papers, or with this application during its entire pendency, or to credit any overpayment, to Deposit Account No. 50-2212, Order No. 098810-0300893. A duplicate of this Transmittal is enclosed.

Respectfully submitted,

Pillsbury Winthrop LLP

Date: December 14, 2004

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By: 

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